

BLUEPRINT

OneWorld

326110/30

363a

Please complete in typescript,  
or in bold black capitals.

**Annual Return**

CHFP010

**Company Number**

1742061

**Company Name in full**

CASTLE OILS LIMITED

**Date of this return**

The information in this return is made up  
to

Day Month Year

0 7 0 8 2 0 0 5

**Date of next return**

If you wish to make your next return to a  
date earlier than the anniversary of this  
return please show the date here.

Companies House will then send a form at  
the appropriate time.

Day Month Year

**Registered Office**

Show here the address at the date of  
this return.

TREATMENT CENTRE, CROMPTON ROAD

Any change of  
registered office **must**  
be notified on form  
287.

Post town

ILKESTON

County / Region

DERBYSHIRE

UK Postcode

DE7 4BG

**Principal business activities**

Show trade classification code number(s)  
for the principal activity or activities.

9305

If the code number cannot be determined,  
give a brief description of principal  
activity.

A41  
COMPANIES HOUSE0556  
12/08/05

When you have completed and signed the form please send it to the  
Registrar of Companies at:

**Companies House, Crown Way, Cardiff, CF14 3UZ****DX 33050 Cardiff**

for companies registered in England and Wales

or

**Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB**

for companies registered in Scotland

**DX 235 Edinburgh**

**Register of members**

If the register of members is not kept at the registered office, state here where it is kept.

20 BLACK FRIARS LANE

Post town LONDON

County / Region UK Postcode EC4V 6HD

**Register of Debenture holders**

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state where it is kept.

Post town

County / Region UK Postcode

**Company type**

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

☐☒☐☐☐☐☐

Please tick the appropriate box

**Company Secretary**

Details of a new company secretary must be notified on form 288a.

(Please photocopy this area to provide details of joint secretaries).

Name

\* Style / Title

Mr

Forename(s)

PETER KARL

\* Voluntary details.

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Address

Surname

MEISTER

10 MILTON COURT, MILTON MALSOR

**Usual residential address** must be given. In the case of a corporation, give the registered or principal office address.

Post town NORTHAMPTON

County / Region NORTHAMPTONSHIRE UK Postcode NN7 3AX

Country

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**Directors***Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

**Directors** In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

**Name** \* Style / Title | MR

**Date of birth** | Day | Month | Year | 0 | 8 | 1 | 1 | 1 | 9 | 6 | 6

**Forename(s)** | ANDREW MARK

**Surname** | ELLIOTT

**Address** | 59 RACKFORD ROAD, NORTH ANSTON

**Usual residential address** must be given. In the case of a corporation, give the registered or principal office address.

**Post town** | SHEFFIELD

**County / Region** | SOUTH YORKS **UK Postcode** | S25 4DE

**Country** | ENGLAND **Nationality** | British

**Business occupation** | Company Director

\* Voluntary details.

**Name** \* Style / Title | Mr

**Date of birth** | Day | Month | Year | 2 | 4 | 0 | 2 | 1 | 9 | 4 | 2

**Forename(s)** | MICHAEL ROGER

**Surname** | HEWITT

**Address** | OLD STOCKS, VALLEY ROAD, HUGHENDEN VALLEY

**Usual residential address** must be given. In the case of a corporation, give the registered or principal office address.

**Post town** | HIGH WYCOMBE

**County / Region** | BUCKS **UK Postcode** | HP14 4PF

**Country** | **Nationality** | BRITISH

**Business occupation** | CONSULTANT

**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

**Directors** In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

Name \* Style / Title | Mr

Day Month Year

Date of birth | 0 5 | 1 1 | 1 9 6 4

Forename(s) | PETER KARL

Surname | MEISTER

Address | 10 MILTON COURT, MILTON MALSOR

**Usual residential address** must be given. In the case of a corporation, give the registered or principal office address.

Post town | NORTHAMPTON

County / Region | NORTHAMPTONSHIRE UK Postcode | NN7 3AX

Country | Nationality | BRITISH

Business occupation | MANAGEMENT ACCOUNTANT

\* Voluntary details.

Name \* Style / Title | MR

Day Month Year

Date of birth | 0 4 | 1 0 | 1 9 6 6

Forename(s) | DARREN JOHN

Surname | TUSTIN

Address | HOME FARM BARN

**Usual residential address** must be given. In the case of a corporation, give the registered or principal office address.

Post town | DIDDLEBURY

County / Region | SHROPSHIRE UK Postcode | SY7 9DH

Country | ENGLAND Nationality | BRITISH

Business occupation | GENERAL MANAGER

**Issued share capital**

Enter details of all the shares in issue at the date of this return.

Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
ORDINARY	162,408	£162,408.00
<b>Totals</b>	162,408	162,408.00

**List of past and present shareholders**

(use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

There were no changes in the period

☒

on paper

in another format

A list of changes is enclosed

☐☐

A full list of shareholders is enclosed

☒☐**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed



Date

7/8/05

† Please delete as appropriate.

† a director / secretary

When you have signed the return send it with the fee to the Registrar of Companies.  
Cheques should be made payable to **Companies House**.

This return includes

1

continuation sheets.

(enter number)

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

REF: 20356/20852, MAYER, BROWN, ROWE &amp; MAW LLP,

11 PILGRIM STREET, LONDON, EC4V 6RW

Tel

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DX number LDE 93 DX exchange CHANCERY LANE

# List of past and present shareholders

## Schedule to form 363a

CHFP010

Company Number 1742061

Company Name in full CASTLE OILS LIMITED

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
  - The company's first annual return following the incorporation;
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

Shareholders' details		Shares or amount of stock transferred (if appropriate)	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer
Name CASTLE WASTE SERVICES LIMITED		£1.00 ORDINARY	Shares Held 162,408		
Address TREATMENT CENTRE, CROMPTON ROAD, ILKESTON, DERBYSHIRE					
UK postcode DE7 4BG					
Name					
Address					
UK postcode					
Name					
Address					
UK postcode					